

Amend Sections 87101(d) and (m) to read:

87101 DEFINITIONS

87101

For purposes of this chapter the following definitions shall apply: (Continued)

(d) (Continued)

(4) Dementia. "Dementia" means a deterioration the loss of intellectual function (such as thinking, remembering, reasoning, exercising judgement and making decisions) and other cognitive skills functions, leading to a decline in one's sufficient to interfere with an individual's ability to perform activities of daily living or to carry out social or occupational activities. Dementia is not a disease itself, but rather a group of symptoms that may accompany certain conditions or diseases, including Alzheimer's Disease. Symptoms may include changes in personality, mood, and/or behavior. Dementia is irreversible when caused by disease or injury, but may be reversible when caused by depression, drugs, alcohol, or hormone/vitamin imbalances. (Continued)

(8) Direct care staff. "Direct care staff" means the licensee, and/or those individuals employed by the licensee, who provide direct care to the residents, including, but not limited to, assistance with activities of daily living.

(89) (Continued)

(910) (Continued)

(101) (Continued)

(m) (1) (Continued)

(2) Mild Cognitive Impairment. "Mild cognitive impairment" (MCI) refers to people whose cognitive abilities are in a "conditional state" between normal aging and dementia. Normal age-related memory changes can include forgetting a person's name or the location of an object, however, individuals with MCI have difficulty with short-term memory loss. MCI is a state in which at least one cognitive function, usually short-term memory, is impaired to an extent that is greater than would be anticipated in the normal aging process. MCI is characterized by short-term memory problems, but no other symptoms of dementia (e.g., problems with language, judgement, changes in personality or behavior) that affect a person's daily functioning. Individuals with MCI may experience some difficulty with intellectually demanding activities, but lack the degree of cognitive and functional impairment required to meet diagnostic criteria for dementia. (Continued)

Authority Cited: Sections 1569.23, 1569.30, 1569.616, and 1569.698, Health and Safety Code.

Reference: 42 CFR 418.3; Sections 1569.1, 1569.2, 1569.5, 1569.10, 1569.145, 1569.15, 1569.153, 1569.157, 1569.158, 1569.17, 1569.19, 1569.191, 1569.193, 1569.20, 1569.21, 1569.23, 1569.31, 1569.312, 1569.33, 1569.38, 1569.44, 1569.47, 1569.54, 1569.616, 1569.626, 1569.699, 1569.73, 1569.74, 1569.82, 1771, and 1797.196, Health and Safety Code; Section 15610.13, Welfare and Institutions Code; and Sections 1800, 4615, 4650, and 4753, Probate Code.

Amend Section 87111(a) to read:

87111 ADVERTISEMENTS AND LICENSE NUMBER

87111

- (a) In accordance with Health and Safety Code Sections 1569.68 and 1569.681, Licensees shall reveal each facility license number in all public advertisements, including Internet, or correspondence ~~in accordance with Health and Safety Code Sections 1569.681 and 1569.68.~~ (Continued)

Authority Cited: Section 1569.30~~(a)~~, Health and Safety Code.

Reference: Sections 1569.68~~4~~ and 1569.68~~1~~, Health and Safety Code.

Amend Section 87222 to read:

87222 PLAN OF OPERATION

87222

- (a) Each facility shall have and maintain a current, written definitive plan of operation. The plan and related materials shall be on file in the facility and shall be submitted to the licensing agency with the license application. Any significant changes in the plan of operation which would affect the services to residents shall be submitted to the licensing agency for approval. The plan and related materials shall contain the following:
(Continued)
- (6) Plan for training of staff, as required by Section 87565(c).
- (7) ~~A sSketches of the building(s) to be occupied, showing dimensions, including of the following:~~
- (A) Building(s) to be occupied, including a floor plan which that describes the capacities of the buildings for the uses intended, and a designation of the rooms to be used for nonambulatory residents;
- (B) ~~and a sketch of t~~The grounds showing buildings, driveways, fences, storage areas, pools, gardens, recreation area and other space used by the residents.
~~All sketches shall show dimensions.~~ (Continued)
- (b) A licensee who advertises or promotes dementia special care, programming, and/or environments shall include additional information in the plan of operation as specified in Section 87725(a)(2).
- (c) A licensee who accepts or retains residents diagnosed by a physician to have dementia shall include additional information in the plan of operation as specified in Section 87724(b).

Authority Cited: Section 1569.30, Health and Safety Code.

Reference: Sections 1569.15, 1569.157, 1569.175, 1569.2, 1569.30, 1569.31, 1569.312, 1569.313, ~~and~~ 1569.316(a), 1569.626, and 1569.627, Health and Safety Code; and Section 11006.9, Welfare and Institutions Code.

Amend Section 87451(a)(5) to read:

87451 SERIOUS DEFICIENCIES - EXAMPLES

87451

- (a) Regulations including but not limited to the following may result in serious deficiencies when a failure to comply presents an immediate or substantial threat to the physical health, mental health, or safety of the residents: (Continued)
 - (5) Sections 87582(c)(1) or (2), or (~~54~~), or Section 87701 relating to persons with communicable diseases, persons requiring inpatient health care, persons who are bedridden, or persons with a prohibited health condition.

Authority Cited: Section 1569.30, Health and Safety Code.

Reference: Sections 1569.1, 1569.2, 1569.30, 1569.31, 1569.312, 1569.315, 1569.335, 1569.485, 1569.49, and 1569.54, Health and Safety Code.

Amend Sections 87565(c), (c)(3)(C), and (c)(5) to read:

87565 PERSONNEL REQUIREMENTS - GENERAL (Continued)

87565

- (c) All RCFE staff who assist residents with personal activities of daily living shall receive at least ten ~~(10)~~ hours of initial training within the first four ~~(4)~~ weeks of employment and at least four ~~(4)~~ hours annually thereafter. (Continued)
- (3) All training shall be conducted by a person who is knowledgeable in a subject that is relevant to the subject area in which training is to be provided, and who satisfies at least one of the following criteria related to education and experience: (Continued)
- (C) At least two ~~(2)~~ years of experience in California as an administrator of an RCFE, within the last eight ~~(8)~~ years, and with a record of administering facilities in substantial compliance, as defined in Section 87101(s)~~(8)~~. (Continued)
- (5) ~~Documentation of the training shall be retained in the employee's file. For classroom courses, documentation shall consist of notices of course completion signed by the trainer. The licensee shall maintain documentation pertaining to staff training in the personnel records, as specified in Section 87566(c)(2).~~ For on-the-job training, documentation shall consist of a statement or notation, made by the trainer, of the content covered in the training. Each item of documentation shall include a notation that indicates which of the criteria of Section 87565(c)(3) is met by the trainer. (Continued)

Authority Cited: Sections 1569.30 and 1569.625~~(b)~~, Health and Safety Code.

Reference: Sections 1569.17, 1569.30, 1569.31, 1569.312, and 1569.625, Health and Safety Code; and Section 42001, Vehicle Code.

Amend Section 87566 to read:

87566 PERSONNEL RECORDS

87566

(a) (Continued)

(b) (Continued)

(c) Licensees shall maintain in the personnel records verification of required staff training and orientation.

(1) The following staff training and orientation shall be documented:

(eA) For ~~RCFE~~ staff who assist with personal activities of daily living, there shall be documentation of at least ten ~~(10)~~ hours of initial training within the first four ~~(4)~~ weeks of employment, and at least four ~~(4)~~ hours of training annually thereafter ~~continuing education~~ in one or more of the content areas as specified in Section 87565(c)(2).

(B) For staff who provide direct care to residents with dementia in a facility in which the licensee advertises dementia special care, programming, and/or environments, the licensee shall document the following:

1. The orientation received as specified in Section 87725.1(a)(1).

2. The in-service training received as specified in Section 87725.1(a)(2).

(2) Documentation of staff training shall include:

(A) Trainer's full name;

(B) Subject(s) covered in the training;

(C) Date(s) of attendance; and

(D) Number of training hours per subject.

1. If the training is provided by a trainer in a classroom setting, documentation shall consist of notices of course completion signed by the trainer.

2. If the educational hours/units are obtained through an accredited educational institution, documentation shall include a copy of a transcript or official grade slip showing a passing mark.

3. If the educational hours/units are obtained through continuing education, documentation shall include a transcript or official grade slip showing a passing mark, if applicable, or a Certificate of Completion.
- (d) The licensee shall maintain documentation that an administrator has met the certification requirements specified in Section 87564.2 or the recertification requirements in Section 87564.3.
- (ge) (Continued)
- (f) (Continued)
- (2) The licensing agency shall be entitled to inspect, audit, remove if necessary, and copy the personnel records upon demand during normal business hours.
- (eg) (Continued)

Authority Cited: Sections 1569.30 and 1569.616(~~j~~), Health and Safety Code.

Reference: Sections 1569.30, 1569.31, 1569.312, 1569.613, 1569.616, ~~and~~ 1569.625, and 1569.626, Health and Safety Code.

Amend Section 87569(b)(5) to read:

87569 MEDICAL ASSESSMENT (Continued)

87569

(b) The medical assessment shall include, but not be limited to: (Continued)

- (5) ~~A The determination of whether the person's is ambulatory or nonambulatory status as defined by in Section 87101(a)(4) or (n), and or bedridden status, as defined in Section 87582(d).~~ The assessment shall indicate whether nonambulatory status is based upon the resident's physical condition, mental condition or both. (Continued)

Authority Cited: Section 1569.30, Health and Safety Code.

Reference: Sections 1569.1, 1569.2, 1569.30, 1569.31, 1569.312, 1569.315, and 1569.54, Health and Safety Code.

Amend Section 87570(b) to read:

87570 RESIDENT RECORDS (Continued)

87570

(b) Each record shall contain at least the following information: (Continued)

(6) Names, addresses, and telephone numbers of responsible persons, defined by ~~s~~Section 87101(r)-(93), to be notified in case of accident, death, or other emergency.
(Continued)

(15) Documents and information required by the following:

(A) Section 87583, Pre-Admission Appraisal – General;

(B) Section 87584, Functional Capabilities;

(C) Section 87585, Mental Condition;

(D) Section 87586, Social Factors;

(E) Section 87587, Reappraisals; and

(F) Section 87588, Documentation and Support. (Continued)

Authority Cited: Section 1569.30, Health and Safety Code.

Reference: Sections 1569.1, 1569.2, 1569.30, 1569.31, 1569.312, 1569.315, 1569.32, 1569.54, and 1569.73, Health and Safety Code; and Section 11006.9, Welfare and Institutions Code.

Amend Sections 87582(b), (b)(4), (c), and (c)(3) through (5) to read:

87582 ACCEPTANCE AND RETENTION LIMITATIONS (Continued) 87582

- (b) The following persons may be ~~received into~~ accepted or retained ~~by a in the Residential Care Facility for the Elderly~~: (Continued)
- (4) Persons with ~~mild~~ problems ~~such as~~ including, but not limited to, forgetfulness, wandering, confusion, irritability, and inability to manage money, ~~etc.~~ (Continued)
- (c) ~~Except as otherwise provided in Section 87582(f), n~~No resident shall be ~~admitted~~ accepted or retained ~~in a residential care facility for the elderly~~ if any of the following apply: (Continued)
- ~~(3) The resident is not elderly and either has needs which are in conflict with the other residents or the program of services offered, or requires more care and supervision than other residents.~~
- ~~(4)~~
- (3) The resident's primary need for care and supervision results from either: dementia or a mental disorder resulting in ongoing behavior which would upset the general resident group, would require a greater amount of care and supervision than the other residents in the facility, or cannot generally benefit from the program of services available in the facility.
- (A) An ongoing behavior, caused by a mental disorder, that would upset the general resident group; or
- (B) Dementia, unless the requirements of Section 87724, Care of Persons with Dementia, are met.
- ~~(5)~~ The resident is bedridden, other than for a temporary illness or for recovery from surgery, except as otherwise provided in Section 87582(f). (Continued)

Authority Cited: Sections 1569.30 and 1569.698~~(e)~~, Health and Safety Code.

Reference: Sections 1250, 1569.1, 1569.2, 1569.30, 1569.31, 1569.312, 1569.54, 1569.699, and 1569.72, Health and Safety Code.

Amend Section 87591 to read:

87591 OBSERVATION OF THE RESIDENT

87591

The licensee shall ensure that residents are regularly observed ~~each resident~~ for changes in physical, mental, emotional and social functioning. ~~The licensee shall provide and that appropriate assistance is provided~~ when such observation reveals unmet needs ~~which might require a change in the existing level of service, or possible discharge, or transfer to another type of facility.~~ When changes such as unusual weight gains or losses or deterioration of mental ability or a physical health condition are observed, the licensee shall ~~document~~ ensure that such changes ~~and bring such changes~~ are documented and brought to the attention of the resident's physician and the resident's responsible person, if any.

Authority Cited: Section 1569.30, Health and Safety Code.

Reference: Sections 1569.1, 1569.2, 1569.30, 1569.31 and 1569.312, Health and Safety Code.

Amend Sections 87593(d)(6), (e), and (e)(1) to read:

87593 REQUIREMENTS FOR EMERGENCY ADULT PROTECTIVE 87593
SERVICES PLACEMENTS (Continued)

- (d) The licensee shall not accept the following persons as APS emergency placements:
(Continued)
- (6) Individuals whose primary need for care and supervision results from ~~dementia or a mental disorder resulting in an ongoing behavior, caused by a mental disorder,~~ that would upset the general resident group [Section 87582(c)(4)(3)(A)], ~~unless the licensee meets the requirements in Section 87593(e) below.~~ (Continued)
- (e) If a licensee accepts an APS emergency placement with dementia, the licensee ~~must~~ shall meet the requirements in Section 87724, Care of Persons with Dementia. ~~and ensure the following criterion is met.~~
- (1) ~~Prior to acceptance, the licensee must have a dementia waiver, pursuant to Section 87116, to accept and retain residents with dementia who are considered nonambulatory because they are unable to mentally respond to a sensory signal approved by the State Fire Marshall or an oral instruction relating to fire danger.~~
(Continued)

Authority Cited: Sections 1569.30 and 1569.31, Health and Safety Code; ~~Sections 15763(a), (a)(2), and (d), Welfare and Institutions Code;~~ and Senate Bill 2199 (Chapter 946, Statutes of 1998), Section 14 uncodified.

Reference: Sections 15610.13 and 15763, Welfare and Institutions Code; and Sections 1569.1, 1569.2, 1569.312, 1569.315, 1569.316, 1569.47, 1569.54, 1569.698, 1569.699, 1569.71, 1569.72, and 1569.73, ~~and 13131,~~ Health and Safety Code.

Amend Section 87724 to read:

87724 CARE OF PERSONS WITH DEMENTIA

87724

(a) (Renumbered to Section 87724(c).)

(a) This section applies to licensees who accept or retain residents diagnosed by a physician to have dementia. Mild cognitive impairment, as defined in Section 87101(m), is not considered to be dementia.

(1) (Renumbered to Section 87724(c)(4).)

(A) (Renumbered to Section 87724(c)(4)(A).)

(2) (Renumbered to Section 87724(c)(1).)

(3) (Renumbered to Section 87724(b).)

(4) (Renumbered to Section 87724(c)(3).)

(5) (Renumbered to Section 87724(d).)

(A) (Renumbered to Section 87724(d).)

(B) (Renumbered to Section 87724(e).)

(C) (Renumbered to Section 87724(f)(1).)

(D) (Renumbered to Section 87724(f)(2).)

(E) (Renumbered to Section 87724(h).)

(F) (Renumbered to Section 87724(j).)

~~(G) The furniture and the equipment shall be safe.~~

~~(6) Ensuring that the documents and information in Sections 87569 through 87570 and 87583 through 87588 are on file at the facility.~~

(A) (Renumbered to Section 87724(c)(5).)

(B) (Renumbered to Section 87724(c)(5)(A).)

(7) (Renumbered to Section 87724(c)(2).)

- (b) ~~Without the prior approval of the Department, the licensee may accept and retain residents with dementia who meet the definition in Section 87101(a)(4) of an ambulatory person as determined by a physician pursuant to Section 87569(b)(5).~~

~~(a)(3)~~

- (b) ~~Ensuring that the facility has a written plan of operation which i~~In addition to the requirements as specified in Section 87222, the plan of operation shall addresses the needs of residents with dementia, including:

~~(e)(1)(F)~~

- (1) ~~Procedures to~~ for notifying the resident's physician, family members and responsible persons who have requested notification, and conservator, if any, when a resident's behavior or condition changes;
- (2) Safety measures to address behaviors such as wandering, aggressive behavior and ingestion of toxic materials.

- (e) ~~With the prior approval of the Department pursuant to Section 87116, the licensee may accept and retain residents with dementia who do not meet the definition in Section 87101(a)(4) of an ambulatory person as determined by a physician pursuant to Section 87569(b)(5).~~

- (1) ~~With each exception or waiver request the licensee shall submit all of the following:~~

- (A) ~~The completed documents and information in Section 87724(a)(6);~~
- (B) ~~A plan of operation as specified in Section 87724(a)(3);~~
- (C) ~~A training plan as specified in Section 87724(a)(4);~~
- (D) ~~(Renumbered to Section 87724(c)(7).)~~
- (E) ~~Resident assessment and reassessment procedures which conform to Sections 87724(a)(6)(A) and (B);~~
- (F) ~~(Renumbered to Section 87724(b)(1).)~~
- (G) ~~A written plan developed with the concurrence of each resident's physician, which includes facility-wide practices and resident-specific procedures to minimize the need for psychoactive medications;~~
- (H) ~~A disaster and mass casualty plan as specified in Section 87724(a)(7).~~

- (a) Licensees who accept and retain residents with dementia shall be responsible for ensuring the following:

(a)(2)

- (1) ~~Ensuring that~~ The facility has a nonambulatory fire clearance pursuant to Section 87220 for each room ~~which that~~ will be used to accommodate a resident with dementia who ~~meets the definition of a nonambulatory person as specified in Section 87101n.(2) and Health and Safety Code Section 13131~~ is unable to or unlikely to respond either physically or mentally to oral instructions relating to fire or other dangers and to independently take appropriate actions during emergencies or drills.

(a)(7)

- (2) ~~Ensuring the development of a~~ The disaster and mass casualty plan, ~~which meets the as requirementsd in Section 87223, and~~ addresses the safety of residents with dementia.

(a)(4)

- (3) ~~Ensuring that facility staff are trained in the areas specified in Section 87565(e), and in~~ In addition to the on-the-job training requirements in Section 87565(d), staff who provide direct care to residents with dementia shall receive the following training as appropriate for the job assigned and as evidenced by safe and effective job performance:
 - (A) ~~d~~Dementia care, identifying and reporting resident abuse and neglect, including, but not limited to, knowledge about hydration, skin care, communication, therapeutic activities, behavioral challenges, the environment, and assisting with activities of daily living;
 - (B) Recognizing symptoms that may create or aggravate dementia behaviors, including, but not limited to, dehydration, urinary tract infections, and problems with swallowing; and
 - (C) ~~and the behavioral~~ Recognizing the effects of medications on residents with commonly used to treat the symptoms of dementia.

(a)(1)

- (4) ~~Ensuring that, in addition to Section 87565, staffing~~ There is an adequate number of direct care staff to provide supervision for support each resident's physical, social, emotional, safety and health care needs as identified in his/her current appraisal with dementia while meeting the needs of all facility residents.

(a)(1)(A)

- (A) In addition to requirements specified in Section 87581, Night Supervision, a facility with fewer than 16 residents shall have at least one night staff person awake and on duty if any resident with dementia is determined through a pre-admission appraisal, reappraisal or observation to require awake night supervision.

~~(a)(6)(A)~~

~~(5)~~ Each resident with dementia shall have an annual medical assessment as specified in Section 87569, Medical Assessment, and ~~an annual~~ reappraisal done at least annually, both of which shall include a reassessment of the resident's dementia care needs.

~~(a)(6)(B)~~

~~(A)~~ When any medical assessment, appraisal, or observation indicates that the resident's dementia care needs have changed, corresponding changes shall be made in the care and supervision provided to that resident, ~~or the resident shall be relocated to another facility or to another residence appropriate for that resident's current needs.~~

~~(6)~~ Appraisals are conducted on an ongoing basis pursuant to Section 87587, Reappraisals.

~~(c)(1)(D)~~

~~(7)~~ An activity program ~~which~~ shall addresses the needs and limitations of residents with dementia; and includes large motor activities; and includes perceptual and sensory stimulation;

~~(a)(5) and (a)(5)(A)~~

~~(d)~~ ~~Ensuring that in~~ In addition to requirements specified in Section 87691, Maintenance and Operation, safety of the physical plant modifications shall include, but not be limited to, the following: inaccessibility of ranges, heaters, wood stoves, inserts, and other heating devices are made inaccessible to residents with dementia.

~~(a)(5)(B)~~

~~(e)~~ Swimming pools and other bodies of water ~~are~~ shall be fenced and in compliance with state and local building codes.

~~(f)~~ The following shall be stored inaccessible to residents with dementia:

~~(a)(5)(C)~~

~~(1)~~ Knives, matches, firearms, tools and other items that could constitute a danger to the resident(s) ~~are stored where they are inaccessible to the residents.~~

~~(a)(5)(D)~~

~~(2)~~ Over-the-counter medication, ~~in addition to the medications specified in Section 87575~~ nutritional supplements or vitamins, alcohol, cigarettes, and all toxic substances such as certain plants, gardening supplies, cleaning supplies and cigarettes disinfectants are made inaccessible.

~~(g)~~ As required by Section 87572(a)(12), residents with dementia shall be allowed to keep personal grooming and hygiene items in their own possession, unless there is evidence to substantiate that the resident cannot safely manage the items.

- (1) Evidence means documentation from the resident's physician that the resident is at risk if allowed direct access to personal grooming and hygiene items.
- (a)(5)(E)
- (h) Yards Outdoor facility space used for resident recreation and leisure shall be completely enclosed by a fenced, with self-closing latches and gates, or walls, to protect the safety of residents.
 - (di) The licensee may use wrist bands ~~and or~~ other resident egress alert devices worn by the resident, with the prior written approval of the resident or ~~authorized representative conservator~~, provided that such devices do not violate the resident's rights as specified in Section 87572, Personal Rights.
- (a)(5)(F)
- (j) ~~Exterior doors~~ The licensee shall include an operational bell/buzzer or other have an auditory devices to alert or other staff when the door is opened alert feature to monitor exits, if exiting presents a hazard to any resident.
 - (ek) The following initial and continuing requirements must be met for the licensee to utilize delayed egress devices on exterior doors or perimeter fence gates:
 - (1) The licensee shall notify the ~~Department~~ licensing agency immediately after determining the date that the device will be installed.
 - (2) The licensee shall ensure that the fire clearance includes approval of delayed egress devices.
 - (3) ~~Following the disaster and mass casualty plan specified in Section 87724(a)(7), fire and earthquake drills shall be conducted at least once every three months on each shift and shall include, at a minimum, all facility direct care staff who provide or supervise resident care and supervision.~~
 - (4) Without violating Section 87572, Personal Rights, facility staff shall attempt to redirect a resident ~~with dementia~~ who attempts to leave the facility.
 - (5) Residents who continue to indicate a desire to leave the facility following ~~an egress delay~~ redirection shall be permitted to do so with staff supervision.
 - (6) Without violating Section 87572, Personal Rights, facility staff shall ensure the continued safety of residents ~~with dementia when~~ if they wander away from the facility.
 - (7) For each incident in which a resident wanders away from the facility unsupervised, ~~The licensee shall report the incident to the Department licensing agency, to the resident's conservator and/or other responsible representative person, if any, and to any family member who has requested notification each incident in which a resident with dementia wanders away from the facility.~~ The report shall be made by

telephone no later than the next working day and in writing within seven calendar days.

- (8) Delayed egress devices shall not substitute for trained staff in sufficient numbers to meet the care and supervision needs of all residents and to escort residents ~~with dementia~~ who leave the facility.
- (9) The licensee shall not accept or retain residents determined by a physician to have a primary diagnosis of a mental disorder unrelated to dementia.
- (~~f~~) The following initial and continuing requirements ~~must~~ shall be met for the licensee to lock exterior doors or perimeter fence gates:
 - (1) ~~The licensee~~ shall notify the ~~Department~~ licensing agency of ~~his/her~~ their intention to lock exterior doors and/or perimeter fence gates.
 - (2) The licensee shall ensure that the fire clearance includes approval of locked exterior doors or locked perimeter fence gates.
 - (3) ~~Pursuant to Sections 87116 and 87724(c), the licensee shall obtain a waiver from Section 87582(e)(4), to permit the acceptance of residents with dementia.~~
 - (4) ~~Pursuant to Section 87116, t~~The licensee shall obtain a waiver from Section 87572(a)(6), to prevent residents from leaving the facility.
 - (A) Facility staff shall attempt to redirect any unaccompanied resident(s) leaving the facility.
- (5) The licensee shall maintain either of the following documents in the resident's record at the facility ~~and send a copy of the document to the Department within five working days of each resident's admission:~~
 - (A) The conservator's written consent for admission for each resident who has been conserved under the Probate Code or the Lanterman-Petris-Short Act; or
 - (B) A written statement signed by each non-conserved resident ~~who has not been conserved~~ that states the resident understands that the facility has exterior door locks or perimeter fence gate locks and that the resident voluntarily consents to admission.
- (6) Interior and exterior space shall be available on the facility premises to permit residents with dementia to wander freely and safely.
- (7) Locked exterior doors or perimeter fences with locked gates shall not substitute for trained staff in sufficient numbers to meet the care and supervision needs of all residents.

- (87) The licensee shall not accept or retain residents determined by a physician to have a primary diagnosis of a mental disorder unrelated to dementia.
- (98) ~~Following the disaster and mass casualty plan specified in Section 87724(a)(7), f~~Fire and earthquake drills shall be conducted at least once every three months on each shift and shall include, at a minimum, all ~~facility~~ direct care staff ~~who provide or supervise resident care or supervision.~~

Authority cited: Sections 1569.30~~(a)~~ and 1569.698~~(e)~~, Health and Safety Code.

Reference: Sections 1569.2~~(a), (e), and (j)~~, 1569.30~~(b)~~, 1569.31, 1569.312, 1569.698, and 1569.699, and 13131, Health and Safety Code.

Adopt Section 87725 to read:

87725 ADVERTISING DEMENTIA SPECIAL CARE, PROGRAMMING, 87725
AND/OR ENVIRONMENTS

- (a) In addition to the requirements in Section 87724, Care of Persons with Dementia, licensees who advertise, promote, or otherwise hold themselves out as providing special care, programming, and/or environments for residents with dementia or related disorders shall meet the following requirements:
- (1) The licensee shall ensure that direct care staff who provide care to any resident(s) with dementia meet the training requirements in Section 87725.1, including six hours of resident care orientation within the first four weeks of employment and eight hours of in-service training per year on the subject of serving residents with dementia.
- (A) Direct care staff includes staff used for staff mealtime and break relief.
- (B) Direct care staff may provide dementia special care to residents in the facility or in designated areas of the facility.
- (2) In addition to the requirements specified in Sections 87222(a) and 87724(b), the licensee shall include in the plan of operation a brief narrative description of the following facility features:
- (A) Philosophy, including, but not limited to, program goals/objectives in relation to meeting the needs of residents with dementia.
- (B) Pre-admission assessment, including the types of assessment tools used to determine residents' dementia care needs and who will participate in the assessment.
- (C) Admission, including the following items that must be addressed when admitting a resident who requires dementia special care:
1. Specification of the designated areas in the facility where dementia special care is provided, which may be the entire facility or only parts of it.
2. Services available specific to residents with dementia.
3. Procedures in place to ensure that the plan of operation is available for review upon request, as required by Section 87725(a)(3).
- (D) Assessment(s), including the following as they pertain to residents receiving dementia special care:

1. Types of assessments used;
 2. Who will participate in resident assessments and procedures for ensuring the opportunity for resident and family involvement; and
 3. Frequency of assessments.
- (E) Activity program for residents with dementia, including, but not limited to:
1. Types of activities;
 - a. Activities may include cognitive/mental stimulation (e.g., crafts, reading, writing, music, current events, reminiscences, movies); physical activities (e.g., gross and fine motor skills); work activities and life skills; social activities; cultural/religious activities; sensory activities; individual/group activities (e.g., games); pet care; and outdoor activities (e.g., field trips, gardening).
 2. Frequency of activities; and
 3. The process to determine what types of activities shall be planned to encompass residents' needs.
 - a. These needs are based on personal preferences, age, beliefs, culture, values, attention span, and life experiences (e.g., family and friend involvement, favorite pastimes, occupations, and geographic areas lived in and visited).
- (F) Staff qualifications. Describe the experience and education required for prospective direct care staff who will provide dementia special care.
- (G) Staff training. Describe the required training for direct care staff who provide dementia special care. At a minimum, the description shall include information on the time frame for training, as specified in Section 87725.1(a)(2), and the training topics, as specified in Section 87725.1(a)(2)(A).
- (H) Physical environment, including environmental factors that ensure a safe, secure, familiar and consistent environment for residents with dementia.
1. Environmental factors that may be considered include: bedroom decor; architectural and safety features (e.g., wide hallways, handrails, delayed egress, secured perimeters); lighting; colors and visual contrasts; types of furniture; signs; noise factors; memory boxes; nourishment and hydration stations; and functional outdoor space and exercise pathways.

- (I) Changes in condition. Procedures to be followed when a resident's condition changes, including, but not limited to, an explanation of:

 - 1. When a new care plan is required;
 - 2. At what point a physician (if any) is involved in developing a care plan;
 - 3. Special techniques/programs (if any) used for managing specific types of behavior; and
 - 4. The conditions that would require a resident to be relocated.
- (J) Success indicators, including procedures to:

 - 1. Ensure an ongoing review of facility programs pertaining to care of residents with dementia;
 - 2. Make necessary adjustments to better meet residents' needs; and
 - 3. Assess the program's overall effectiveness/success.
 - a. Examples of areas that may be reviewed include incident reports, staffing levels, input from others, and resident participation in program activities.
- (3) The admission agreement, as specified in Section 87568(e), shall inform the resident and the resident's responsible person, if any, or the conservator, that the facility features, as specified in Section 87725(a)(2), are described in the facility's plan of operation and that the plan of operation is available for review upon request.
- (4) The licensee shall maintain copies of all facility advertisements and marketing/promotional material that indicate the licensee provides special care, programming, and/or environments for residents with dementia or related disorders, and shall maintain the information for a minimum of three years.

 - (A) This material shall be available to the public upon request.
 - (B) The licensing agency shall be entitled to inspect, audit, remove if necessary, and copy this material upon demand during normal business hours.
- (b) Licensees who will discontinue advertising, promoting, or otherwise holding themselves out as providing special care, programming, and/or environments for residents with dementia or related disorders shall:

 - (1) Provide written notification to the licensing agency and to the resident and the responsible person, if any, or the conservator, at least 30 calendar days prior to

discontinuing advertising or promoting dementia special care, programming, and/or environments.

- (A) The notification shall specify the date that the licensee will cease advertising or promoting dementia special care, programming, and/or environments; and, therefore, shall no longer be required to meet the requirements specified in Section 87725(a) and the training requirements in Section 87725.1.
- (B) The licensee shall maintain a copy of the written notification in each resident's records.
- (2) On the date specified in the notification, cease all advertisements, publications, and/or announcements that pertain to dementia special care including, but not limited to, those in magazines, newspapers, consumer reports, telephone directory yellow pages, professional or service directories, Internet, radio and/or television commercials.

 - (A) Long-term advertisements, such as yellow pages, shall be removed at the next renewal date.
- (3) On the date specified in the notification, remove all written references that indicate that the licensee provides dementia special care, programming, and/or environments from all promotional material, advertisements, and/or printed material, including admission agreements and the plan of operation.

Authority Cited: Section 1569.30, Health and Safety Code.

Reference: Sections 1569.15, 1569.22, 1569.31, 1569.312, 1569.33, 1569.355, 1569.62, 1569.625, 1569.626, and 1569.627, Health and Safety Code.

<u>87725.1</u>	<u>TRAINING REQUIREMENTS IF ADVERTISING DEMENTIA SPECIAL CARE, PROGRAMMING, AND/OR ENVIRONMENTS</u>	<u>87725.1</u>
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- (A) A minimum of two of the following training topics shall be covered annually, and all topics shall be covered within a three-year period:
1. Effects of medications on the behavior of residents with dementia;
 2. Common problems, such as wandering, aggression, and inappropriate sexual behavior;
 3. Positive therapeutic interventions and activities such as exercise, sensory stimulation, activities of daily living, and social, recreational and rehabilitative activities;
 4. Communication skills (resident/staff relations);
 5. Promoting resident dignity, independence, individuality, privacy and choice; and
 6. End of life issues, including hospice.
- (B) Training may be provided at the facility or offsite and may include a combination of observation and practical application.
- (C) The training shall be developed by, or in consultation with, an individual(s) or organization(s) with expertise in dementia care and with knowledge on the training topic areas specified in Section 87725.1(a)(2)(A).
1. Examples of organizations that specialize in dementia care include, but are not limited to: the Alzheimer's Association, Alzheimer's Disease Diagnostic and Treatment Centers affiliated with the University of California, Family Caregiver Alliance and Caregiver Resource Centers, American Society on Aging, colleges and universities, and individuals with educational and professional qualifications specific to dementia.
 - a. If the consultant and trainer are the same person(s), the documentation requirements specified in Sections 87725.1(a)(2)(D) and (F) shall both be met.
- (D) The licensee shall maintain the following documentation for the consultant(s) described in Section 87725.1(a)(2)(C):
1. Name, address, and telephone number;
 2. Date(s) when consultation was provided;
 3. Organization affiliation (if any), as specified in Section 87725.1(a)(2)(C), and/or educational and professional qualifications specific to dementia; and

4. The training topics, specified in Section 87725.1(a)(2)(A), for which consultation was provided.

(E) All trainers shall meet the following education and experience requirements:

1. A minimum of eight hours of certifiable continuing education or three semester units, or the equivalent, from an accredited educational institution, on topics relevant to caring for individuals with dementia.
 - a. Examples of acceptable instruction include, but are not limited to, classes in aging, gerontology, geriatrics, and/or psychosocial needs of the elderly.
2. One of the following experience requirements:
 - a. Current employment as a consultant with expertise in dementia care, as specified in Section 87725.1(a)(2)(C).
 - b. Two years full-time experience, or the equivalent, within the last four years, as an RCFE administrator or as a direct care provider for individuals with dementia.

(F) The licensee shall maintain the following documentation on the trainer(s) described in Section 87725.1(a)(2)(E):

1. Name, address, and telephone number;
2. Topics/subject matter taught;
3. Dates/hours of training provided;
4. Notation that indicates which of the criteria for experience the trainer meets, as specified in Section 87725.1(a)(2)(E)2., and maintain verification of qualifying criteria; and
5. Proof of completion of the educational requirements, as specified in Section 87725.1(a)(2)(E)1., which may include the following:
 - a. If the educational hours/units are obtained through an accredited educational institution, documentation shall include a copy of a transcript or official grade slip showing a passing mark.
 - b. If the educational hours/units are obtained through continuing education, documentation shall include a transcript or official grade slip showing a passing mark, if applicable, or a Certificate of Completion.

(G) The documentation required in Sections 87725.1(a)(2)(D) and (F) shall be retained for at least three years following the date consultation services/training were provided.

1. The licensing agency shall be entitled to inspect, audit, remove if necessary, and copy this documentation upon demand during normal business hours.

(H) The licensee shall maintain in the personnel records documentation on the in-service training required in Section 87725.1(a)(2) for direct care staff and include the training topic(s) covered, as required in Section 87725.1(a)(2)(A).

Authority Cited: Section 1569.30, Health and Safety Code.

Reference: Sections 1569.31, 1569.33, 1569.62, 1569.625, and 1569.626, Health and Safety Code.

Adopt Section 87725.2 to read:

87725.2 ADVERTISING DEMENTIA SPECIAL CARE, PROGRAMMING, AND/OR ENVIRONMENTS AS OF [the effective date of these regulations - to be inserted by OAL upon approval] 87725.2

- (a) Licensees who will no longer advertise, promote, or otherwise hold themselves out as providing dementia special care, programming, and/or environments shall meet all of the requirements of Section 87725(b) no later than [120 calendars after the effective date of these regulations - to be inserted by OAL upon approval].
- (b) Licensees who continue to advertise, promote, or otherwise hold themselves out as providing dementia special care, programming, and/or environments shall comply with the requirements in Sections 87725(a) and 87725.1 as of [the effective date of these regulations - to be inserted by OAL upon approval], with the following exceptions:
 - (1) No later than [120 calendars after the effective date of these regulations - to be inserted by OAL upon approval], the licensee shall:
 - (A) Submit to the licensing agency the additional requirements for the plan of operation that have not been submitted previously, as described in Section 87725(a)(2).
 - (B) Amend the admission agreement to inform the resident and the responsible person, if any, or the conservator, that the facility features, as specified in Section 87725(a)(2), are described in the plan of operation and are available for review upon request. Requirements in Sections 87568(e) and (f) shall also be met.

Authority Cited: Section 1569.30, Health and Safety Code.

Reference: Sections 1569.31, 1569.33, 1569.62, 1569.625, 1569.626, and 1569.627, Health and Safety Code.